

May 22, 2015

Carrie Lindgren  
Issuing Officer  
Iowa Department of Human Services  
Hoover Building, 1st Floor  
1305 East Walnut Street  
Des Moines, Iowa 50309-0114

RE: Iowa High Quality Healthcare Initiative RFP# MED-16-009

Dear Ms. Lindgren,

AmeriHealth Caritas Iowa, Inc. is pleased to submit its response to the RFP for the Iowa High Quality Healthcare Initiative. We recognize that you are taking a bold and ambitious step to improve the health and wellness of the Medicaid population of Iowa and we would be honored to be selected as your partner in ensuring that Iowa Medicaid beneficiaries are not just “healthier” but the “healthiest.”

We believe that AmeriHealth Caritas Iowa is the right partner to help you achieve the objectives set out in this transformational program and deliver the Next Generation of Healthcare. As part of our transmittal letter, we have included an Executive Summary that highlights our capabilities and approach to caring for the whole person through a fully integrated model of care and services and the value we will bring as your partner in improving the overall health and wellness of Iowans.

Medicaid managed care is more than a business to us. It is an **opportunity** to serve the least advantaged and make a difference in people’s lives. Based upon a mission started thirty-two years ago by a small, community health plan focused on serving the poor, today it is a commitment driven forward by a combination of proven expertise and a focus on holistic care and service. We encourage you to reach out to our references, which include leaders from state Medicaid agencies that have undergone similar transformations, leading provider organizations and other key stakeholders, some of whom are also quoted throughout this letter and our proposal, to better understand first-hand what it is like to partner with AmeriHealth Caritas.

The individual who is authorized to respond to the Department about the confidential nature of certain of the information contained in this proposal is:

Robert Gilman, Esq.  
General Counsel  
AmeriHealth Caritas Family of Companies  
200 Stevens Drive  
Philadelphia, PA 19113  
(215) 937-8560  
rgilman@amerihealthcaritas.com

In submitting this proposal, AmeriHealth Caritas Iowa attests as follows:

- AmeriHealth Caritas Iowa will furnish the services required by Enrollees as promptly as is appropriate, and such services will meet the Department's quality standards.
- AmeriHealth Caritas Iowa confirms that the capitation rates provided will cover all services required by Enrollees, and that AmeriHealth Caritas Iowa will meet the Medical Loss Ratio requirements specified by the Department, as set forth in the Scope of Work.
- AmeriHealth Caritas Iowa acknowledges that liquidated damages may be imposed for our failure to perform under the RFP and any resulting contract with the Department.
- AmeriHealth Caritas Iowa further acknowledges that our contract with the Department will be performance-based, and that accordingly, incentives and disincentives may apply to our performance.

We share your deep commitment to accessible and affordable quality healthcare for every person in Iowa and look forward to the opportunity of further collaborating with the State and our provider and community partners to bridge the gaps in healthcare access, innovation and technology for Iowa Medicaid members.

We would be honored and excited to be a long-term partner with the State of Iowa!

Sincerely,



Paul A. Tufano  
Chairman and Chief Executive Officer  
AmeriHealth Caritas Family of Companies



Russell Gianforcaro  
President  
AmeriHealth Caritas Iowa, Inc.

Enclosure: Executive Summary

## Executive Summary

### AmeriHealth Caritas Will Improve the Lives of Iowa Medicaid Members

AmeriHealth Caritas has been improving the lives of Medicaid members for more than 30 years. Today, we touch the lives of more than 6.6 million individuals in 16 states and the District of Columbia. Our comprehensive, person-centered approach to care is built on a philosophy of compassion and driven by a focus on outcomes. We deliver care that honors the uniqueness of each member while removing barriers to care so that individuals can access the services they need to get well and stay well. Our community-based approach reaches members where they live, empowering them to make lasting changes that improve their health while reducing strains on the healthcare system.

There are several unique circumstances the State is confronting in the Iowa High Quality Healthcare Initiative. Medicaid managed care is new to Iowa, and unlike many other Medicaid managed care programs, will provide comprehensive services to a broad population including TANF/CHIP members and those with complex needs (e.g., long-term care). Iowa also has a large number of Medicaid members located in rural communities that have significant challenges with access to primary, specialty, emergency and behavioral healthcare. Close communication and engagement with members, providers and advocates will be required to ensure a smooth transition and excellent member experience as well as offering new ways of accessing care.

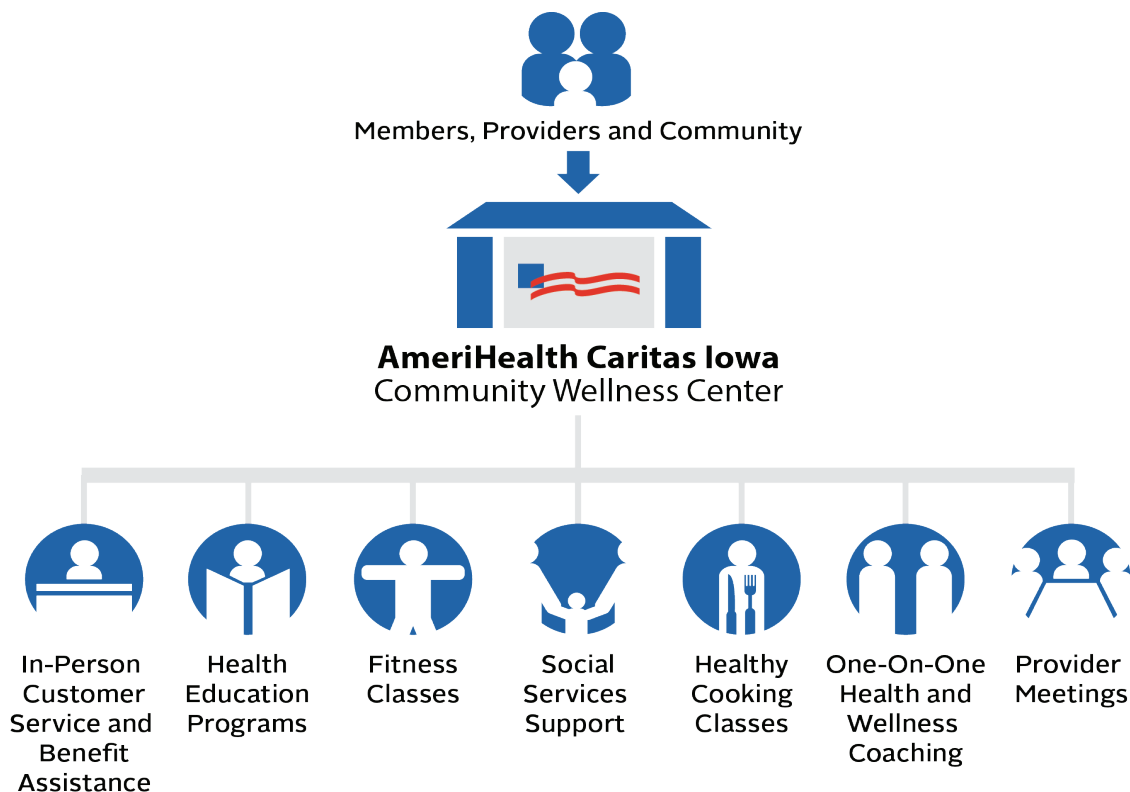
We recognize the State has a number of initiatives underway to improve the health of Iowans including the Chronic Condition Health Homes, Integrated Health Homes for members with severe and persistent mental illness, the State Innovation Model (SIM) for accountable care organization (ACO) development and the Healthiest State Initiative. AmeriHealth Caritas understands the value of these initiatives and recognizes that our tools and programs will complement and help accelerate State initiatives (e.g., enhancing enrollment in Health Homes). We have collaborated on these types of programs in our existing markets and are prepared to do the same in Iowa. In addition, we are pleased to be a sponsor of the 2015 Healthiest State Initiative Annual Meeting in June. We continually strive to engage members in healthy activities and together we will make Iowa the “Healthiest State.”

### Delivering the Next Generation of Healthcare

AmeriHealth Caritas has a long and successful history of partnering with states to address their unique and diverse needs and challenges. Our integrated suite of services will exceed the needs of Iowa Medicaid members while also reducing the administrative burden for the State and lowering the costs for healthcare management and delivery. We have built relationships in Iowa with providers, provider associations and community organizations and have worked diligently to better understand the market and the goals of the Department of Human Services (DHS) to prepare for providing Medicaid managed care services in Iowa. We have also established a subsidiary specific to Iowa. AmeriHealth Caritas Iowa will invest in the Iowa marketplace, creating new jobs, facilities and programs that will contribute to the local community and overall economy.

We will bring new ways of engaging members, empowering them with information and providing access to care. Our soon to be announced **strategic partnership with TheraNOS** will align new technology in laboratory testing with our person-centered approach to proactively inform care plans.

Our investment in Iowa continues with the development of **three, state-of-the-art, Community Wellness Centers, potentially located in Des Moines Cedar Rapids and Sioux City**. We are proud to announce these Community Wellness Centers, which support our mission of helping members get care, stay well and build healthy communities. The Community Wellness Centers will be a resource hub in the community and provide space for new member orientations, community meetings, wellness screenings, care management, doctor appointment scheduling, health education and coordinating social services. In time, these Community Wellness Centers will become an integral part of the fabric of Iowa healthcare and allow the member to strengthen his or her health by providing them with additional tools.



#### **Exhibit 1: AmeriHealth Caritas is Bringing Communities Together in Wellness**

AmeriHealth Caritas' work is focused on improving the healthcare of the communities we serve. Our success in these communities is reflected in our ability to understand and build programs that address those needs. Our approach to removing barriers to healthcare and services is a top priority for our family of companies.

Key components of our Next Generation of Healthcare approach are:

- **Person-centered approach to care** — We understand that care is individual and needs are unique. Our care managers work closely with our members to create holistic care plans and adapt interventions to fit our members' health needs, life circumstances and what they value most. Our Integrated Healthcare Management (IHM) model is designed to address not only the physical health needs of our members, but also the broader range of behavioral health, pharmacy, long-term services, social supports and other healthcare needs that influence the member's current and future health. We use a **"no wrong door"** approach, enabling members to access our services, providers and support through traditional avenues (phone calls), as well as advanced technology means (texting, telehealth) and community-based

encounters (in-home visits, community care management, embedded support in provider offices). This person-centered approach connects members to the right care at the right time.

- **Access to care when and where it is needed with a broad network** — Access to care is a fundamental factor in improving health outcomes. While access to care is a common challenge within Medicaid programs, it is especially acute in Iowa, driven in part by limited transportation and physician shortages. By understanding member needs and meeting them wherever they are, AmeriHealth Caritas enables and empowers access to care when and where it is needed. This includes tackling barriers to access to care on multiple fronts. As we have in other markets, we plan to **contract with the major academic medical centers and children's hospitals** so that our members have access to the best clinical care and innovation. We will **deploy mobile units** in physician shortage areas for preventive care and other services, reimburse non-emergency transportation and stay costs for medically necessary services and ensure access to services with out-of-network providers as needed and without additional cost to the member. We will also have a **comprehensive telemedicine and telepsychiatry program** for Iowa, leveraging existing provider platforms and augmenting those resources with our own telehealth solutions. Our South Carolina and Pennsylvania health plans have been **rated the best Medicaid plan for access by their State Medicaid agencies** as a result of our implementation of similar initiatives and we are committed to the same proactive approach in Iowa.
- **Collaborative partnerships with the State, providers and community organizations** — AmeriHealth Caritas is committed to the communities we serve. We are driven by creating stakeholder value to improve the health of our members. We work collaboratively with State and other partners to address the challenges of the rising costs of care, limited access to care and increasing administrative complexities. **Our 30-year relationship with the Commonwealth of Pennsylvania's Medicaid agency through economic "ups and downs"** demonstrates our unparalleled commitment to our state customer partners. In Iowa, we are building a robust provider network throughout the state with priority health systems, the primary care association, Federally Qualified Health Centers (FQHC), behavioral health providers and other specialists.
- **Data-driven results and evidence-based outcomes that are aligned with broader efforts such as the Iowa SIM program** — At AmeriHealth Caritas, we measure success through the good health of our members. Using proven, data-driven identification techniques and engaging members where they live, work and go to school, we are able to reduce avoidable utilization of emergency rooms (ER), reduce care gaps and improve outcomes. Our approach relies on the collection and analysis of data to understand the issues and enact meaningful interventions and programs to support effective management of costs while improving access to care and health outcomes. Our approach is well-aligned with your SIM efforts. For example, AmeriHealth Caritas is well-positioned to adopt the 3M Value Index Score (VIS) currently used in Iowa's SIM as these same metrics are already part of our **PerformPlus®** value-based programs. We have implemented the full 3M platform in Pennsylvania, South Carolina, Louisiana, Indiana, Nebraska and the District of Columbia over the past seven years, and are able to rapidly and accurately deploy this solution, as well as the accompanying value-based programs and transparency portals, in Iowa.

## Revolutionary innovations for Iowa

We believe that every individual has the right to quality healthcare and services and to benefit from healthcare innovation and technology, regardless of socio-economic status. Giving our members the same healthcare experience that is available to individuals who are more advantaged reinforces this view and our approach to treat all members with dignity and respect. Everything we do and every decision we make starts with our members in mind and we are committed to investing in our members up front.

One example of how AmeriHealth Caritas partners with like-minded and innovative organizations to make quality healthcare and services accessible to every person is **our new strategic partnership with Theranos**, a nationally recognized, CLIA-certified laboratory that offers services for a complete range of tests, from common blood screening panels to specialized testing across all specimen types. Aided by cutting-edge Theranos technology, **we are taking a historic step in transforming how Medicaid members are able to engage in timely, meaningful discussions with their healthcare provider** about their overall health and wellness and establishing comprehensive care plans to drive improvement in health.

If AmeriHealth Caritas Iowa is provided an opportunity to serve the State of Iowa and its Medicaid population, we are committed to leveraging Theranos' revolutionary laboratory platform to ensure that our members and providers have the information they need to make the best healthcare decisions. **AmeriHealth Caritas Iowa is committing to make the up-front investment in our members starting on "day one" to provide enhanced access to testing to enable proactive dialogue with providers and subsequent comprehensive care plan development.**

We are the first Medicaid managed care organization in the nation to leverage this innovative, evidence-based and customizable solution to drive greater engagement among our members and providers. In the very near future, we expect to publicly announce our strategic partnership with Theranos and intent to bring this innovative solution to all of the markets and Medicaid members we serve.

Theranos is working to shape the future of laboratory testing and the way health information is collected, analyzed and communicated in a way that is affordable and available to every person. Many laboratory tests are not completed because the testing process can be intimidating (fear factor). Their **revolutionary laboratory service platform** uses dramatically smaller samples than traditional laboratories, with samples collected from both capillary draws (i.e., finger stick) and traditional methods.

Results are returned much faster than industry averages, with the overwhelming majority of results reported within 24 hours of sample collection. Theranos has partnered with a leading retail pharmacy to place collection sites within retail stores, bringing easy access to Theranos' laboratory services through this nationwide pharmacy footprint. The company also provides a detailed level of transparency by publishing its test menus and prices and is committed to reducing the overall cost of care.

It is important that our members and their healthcare providers have the information they need, when they need it, to develop personal healthcare plans and make timely healthcare decisions. Removing barriers to knowledge and access to healthcare and services for those most in need is a top priority for our family of companies. **Our partnership with Theranos is aligned with our mission, consistent with our commitment to offer solutions to assist our clinical partners and supports our forward-thinking approach to developing innovative, evidence-based and customizable solutions for our members, all of which empowers our members to fully engage in their healthcare.**

---

***Excerpted From Fortune magazine, June 30, 2014***

*“This is about being able to do good,” Holmes says... “And it’s about being able to change the healthcare system through what we believe this country does so well, which is innovation and creativity and the ability to conceive of technology that can help solve policy challenges.”*

*“Consumerizing this health care experience is a huge element of our mission,” Holmes says... “which is access to actionable information at the time it matters.”*

***– Elizabeth Holmes, Chairman, CEO and Founder  
Theranos***

---

AmeriHealth Caritas Iowa is dedicated to providing the highest quality of care at maximum value for Iowa Medicaid members, providers and the State of Iowa. We are genuinely excited and expertly suited to partner with DHS to deliver the next generation of care and improve the overall health of the residents of Iowa. Just as we have proven through our partnerships with other states, we are ready and equipped to engage and address the financial, socio-economic and technical challenges that Iowa faces on a daily basis. **By remaining true to our mission, AmeriHealth Caritas has earned a national reputation for helping people get care, stay well and build healthy communities.**

## **About AmeriHealth Caritas**

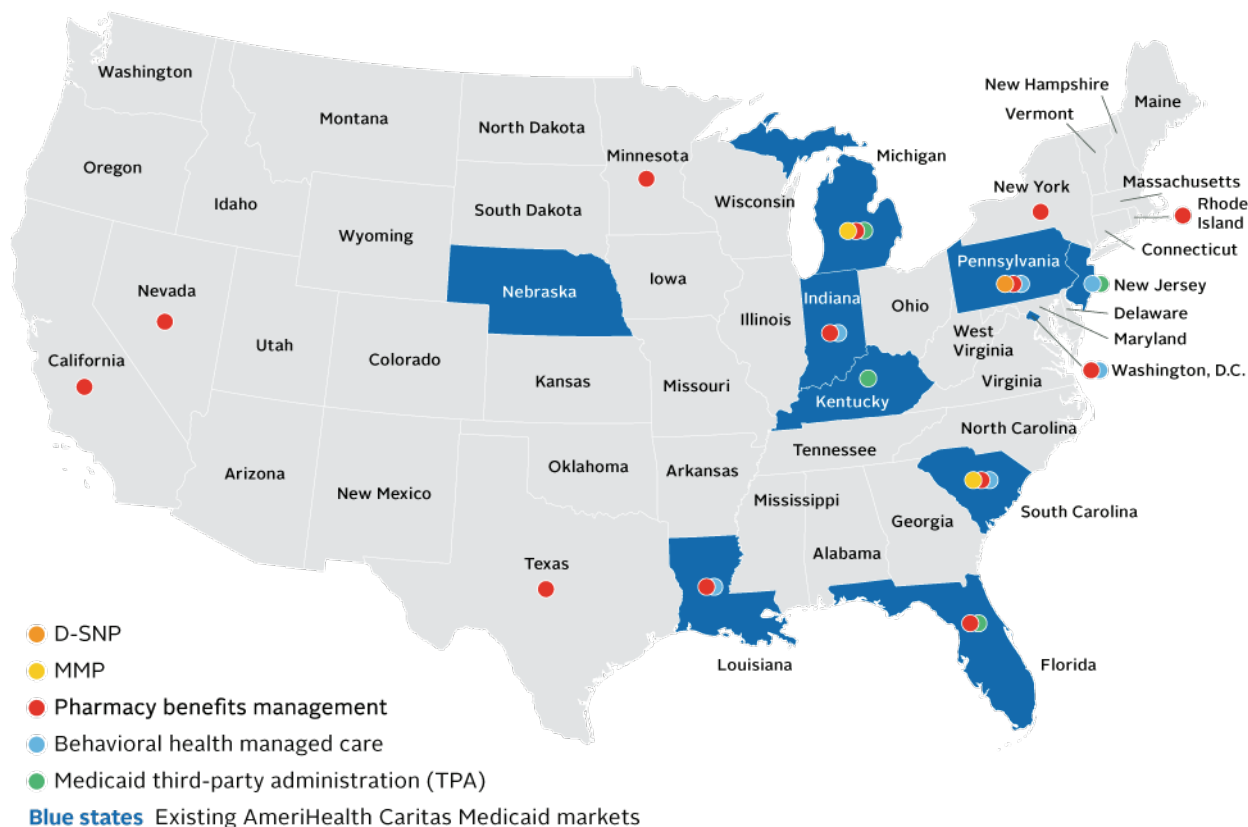
For more than 30 years, AmeriHealth Caritas has been helping people access the care and services they need to live healthier lives. From our roots as a small managed care organization serving low-income residents of West Philadelphia, AmeriHealth Caritas has grown to become an industry leader. Providing healthcare coverage and services to more than 6.6 million members nationwide, our partnerships and commitment to excellence ensure that our members have the best possible health outcomes through an integrated, cost-effective approach that coordinates physical health, behavioral health, pharmacy, community care, long-term care and social services. We remain committed to leveraging our clinical and business expertise to provide seamless, quality healthcare experiences for our existing and future members.





## AmeriHealth Caritas Coverage Area

Touching the lives of more than 6.6 million members nationwide



### Exhibit 2: AmeriHealth Caritas Coverage Area

AmeriHealth Caritas offers a range of products targeting those most in need and at-risk populations including:

- **Full-risk Medicaid managed care** services with a variety of programs and capabilities to meet the special medical and social needs of underserved populations (Temporary Assistance for Needy Families [TANF], Aged, Blind and Disabled [ABD], foster care and Children's Health Insurance Program [CHIP]).
- **Dual eligible services** with prescription drug coverage and a specialized Medicare Advantage special needs plan (D-SNP) and Medicare Medicaid Plans (MMPs) designed for members enrolled in both Medicare and Medicaid.
- **Behavioral health services** leveraging our wholly owned subsidiary PerformCare®, a full-service behavioral health managed care company that supports members through specialized behavioral health and human services programs in the public and private sectors.
- **Pharmacy services** through our wholly owned subsidiaries PerformRx<sup>SM</sup> and PerformSpecialty<sup>SM</sup>. PerformRx provides innovative, cost-effective pharmacy benefits management services for Medicaid, Medicare and commercial health plans, while PerformSpecialty provides specialty pharmacy solutions to members with complex pharmacy needs. Through a distinctive, high-touch approach, PerformRx and PerformSpecialty partner with health plans to improve member outcomes



and financial performance. PerformRx and PerformSpecialty base their success on a clinical focus that is driven by cutting-edge, proprietary technology and a strong Medication Therapy Management program.

- **Insourced dental** services utilizing an internal team to create and manage dental benefits programs. This allows for the development of value-added integrated programs that add to improved quality outcomes for dental and physical health.
- **Third-Party management and administrative services (TPA)** provided to Medicaid managed care clients in markets across the country, including Indiana, Michigan, Kentucky and New Jersey.
- **Long-term services and supports (LTSS)** programs for members providing an integrated solution across physical health, behavioral health, pharmacy, institutional care, home-based care and social support, that are applied across all our markets, including in our MMPs in South Carolina and Michigan.

AmeriHealth Caritas Family of Companies is a privately held company owned by Independence Blue Cross (southeastern Pennsylvania) and Blue Cross Blue Shield of Michigan. These are two of the leading organizations among the independent non-profit Blue Cross Blue Shield companies. With this ownership structure, we are not influenced by shareholder expectations or near-term earnings pressures. Unlike companies who have exited states and/or provider contracts due to poor short-term financial performance, we are able to take a longer-term view toward performance and service and focus on members and mission and our partnership with the State.

## Our Understanding of Iowa

### Overall goals for Medicaid Modernization

Iowa Medicaid is the second largest payor in Iowa serving nearly 26 percent of the population in SFY15. With this new Medicaid program, the diverse Medicaid population across 99 counties statewide will be transitioned into a comprehensive managed Medicaid program. This includes over 560,000 members currently enrolled in a number of programs, including the existing Medicaid, *hawk-I* and Iowa Health and Wellness Plan programs. Unlike many other state Medicaid programs which are limited to the TANF/CHIP population, in Iowa members with complex needs, such as ABD, LTC, LTSS and the integration of behavioral health will be included in this program. With this transition, the State aims to improve quality and access, achieve greater accountability for outcomes and create a more predictable and sustainable Medicaid budget for the State of Iowa.

### Socio-economic status

AmeriHealth Caritas Iowa understands that socio-economic factors play an important role in access to quality healthcare and the type of programs that are required to improve health status. Some of the key socio-economic factors in Iowa include:

- Iowa is the 11th most rural state in the country, with 36 percent of the population living in rural areas as compared to 19 percent nationally.
- Steady urbanization is underway, with nearly all counties experiencing total population growth being associated with metropolitan areas.
- Iowa's population is predominantly homogeneous, with the balance comprised of ethnic groups including Hispanic/Latino, African-American and Asian.

- Iowa has an aging population, and Iowa ranks 5<sup>th</sup> nationally in terms of percentage of total population over 65 years.
- Iowa has a lower poverty rate (13 percent below the federal poverty level) and unemployment rate (3.3 percent) than the national averages.

We believe that our depth of experience and innovative approaches will help address the socio-economic determinants of health in Iowa. For example, we recently implemented a **“Health Empowerment Tour”** in Philadelphia, which is designed to engage and educate participating members as well as the wider community on health and wellness issues in a faith-based setting. The goal of the program is to promote health education, health literacy and preventive healthcare in low-income communities. Results of the program include a 13 percent drop in total cholesterol across attendees, a 10 percent drop in blood pressure and an average weight loss of four pounds. In addition, participants increased their awareness of nutrition content in foods and their willingness to try healthier foods and substitutes. Over 24 percent of participants lost weight. **We plan to implement a similar Health Empowerment Tour in Iowa, in conjunction with the goals of the Healthiest State Initiative.**

AmeriHealth Caritas uses a formal **Cultural Competency Program** that has been built upon the 14 national standards for Culturally and Linguistically Appropriate Services (CLAS) as set forth by the United States Department of Health and Human Services. We have a committee dedicated to helping each of our health plans achieve the **National Committee for Quality Assurance (NCQA) Multicultural Health Care Distinction**, a designation that acknowledges Medicaid health plans that meet defined standards in providing culturally competent care. Our goal is for each of our health plans to achieve this designation. Three AmeriHealth Caritas health plans were among the first six Medicaid plans in the country to be awarded this distinction when it was first offered by NCQA in 2011 and each of these health plans has successfully undergone recertification. **We will seek NCQA Multicultural Health Care Distinction for AmeriHealth Caritas Iowa.**

Some of the tools AmeriHealth Caritas will utilize to meet the changing needs of the Iowa Medicaid population include:

- **Race/Ethnicity/Language (REL) data capture.** AmeriHealth Caritas’ ability to capture additional REL data, beyond what is available in the state Medicaid system, will enable us to proactively design programs and approaches to meet the needs of Iowa Medicaid members. Our enhanced data collection and language capture features enable us to differentiate between languages spoken and languages read. These technology capabilities will be leveraged to best serve the needs of the market.
- **Focus on health equity.** Like its parent company, AmeriHealth Caritas Iowa will maintain a strong focus on understanding health disparities and improving health equity. AmeriHealth Caritas Iowa will analyze outcomes and utilization rates by REL sub-populations and identify opportunities to create focused interventions and programs. This type of targeted approach and analysis will provide additional insights on how best to interact and care for members.

## Health challenges

Some of the important health challenges faced by Iowa Medicaid members include:

- **Asthma:** High rates of adult hospitalization and ER use, driven by low rates of compliance with medication.
- **Behavioral health:** Follow-up after hospitalization for mental illness is less than 60 percent, likely due to mental health access challenges.

- Management of chronic diseases such as diabetes: Screening rates among diabetic Medicaid members for Hemoglobin A1C are below the national average.
- High tobacco use with insufficient discussion of cessation medication or strategies: 30-35 percent tobacco use rates, with rates for intervention lower than the national average.
- Balance between institutional and home-based long-term care: Majority of the Medicaid long-term services and supports (LTSS) funds are spent on institutional, not home-based, care.

We deploy programs to address these health challenges across our various markets, with proven outcomes. For example:

- **Asthma:** AmeriHealth Caritas' asthma medication ratio, a standard measure of compliance with treatment, was above the national average for 2014. One health plan scored in the 75th percentile and another health plan in the 90th percentile among Medicaid plans nationally.
- **Behavioral health:** Medication adherence is a critical outcome metric for members with mental illness. For members with schizophrenia who are taking antipsychotic medications, all of our health plans scored in the 75th percentile, with one scoring in the 90th percentile, among Medicaid plans nationally.
- **Chronic conditions, such as diabetes, cardiovascular disease and asthma:** Our blended Integrated Healthcare Management (IHM) model combines case and disease management into a holistic approach that addresses co-morbid conditions, behavioral health needs and social/environmental support needs. Within this program, condition management blue prints detail the priority areas our care managers need to focus on for each co-morbid condition. Evidence-based blue prints are available for areas such as asthma, diabetes, chronic obstructive pulmonary disease (COPD), heart disease, obesity, sickle cell anemia and depression. Through our focus on transition management and connecting members to care, we decreased readmissions for members with these targeted chronic conditions by 11.5 percent in 2014 across our health plan populations.
- **High tobacco use:** We screen all members for tobacco use during the initial health risk assessment and members identified for individual care management during the comprehensive assessment phase. Any member identified as using tobacco is provided with information on tobacco cessation programs, including toll-free QUIT lines, access to counseling and the availability of tobacco cessation medications.
- **Balance between institutional and home-based long-term care:** An example of AmeriHealth Caritas' experience coordinating long-term services and supports is our specialized Pediatric Shift Care Unit, which provides support and assistance to medically fragile members less than 21 years of age with complicated healthcare needs, including ventilator dependence. Because of our specialized unit and relationships with specialty care providers, including Children's Hospital of Philadelphia, all of these members receive extensive skilled nursing and other in-home support services allowing these high-complexity members to remain at home with their families.

## Barriers to care and health access

Many of the health challenges described above are due to insufficient access to outpatient care, including primary care, mental health and specialty care. For example:

- There are 86 primary care physicians per 100,000 residents, ranking Iowa 47th in the country.
- According to a 2011 Iowa Medical Society report, Iowa ranks 51st among the 50 states and the District of Columbia in OB-GYN and emergency physician supply.

- In a 2011 Community Needs Assessment, over 40 percent of the counties indicated a lack of transportation as a barrier to accessing health services.
- In the same assessment, 35 percent of counties indicated an unmet need for mental health services.

These access challenges in the broader population can be even more acute for Medicaid members given their lower socio-economic status. Our core belief is that Medicaid members should receive access to quality healthcare regardless of socio-economic status. In all of the markets served by AmeriHealth Caritas, **our networks are broad and inclusive**. It is also our goal to partner with academic teaching hospitals in every market to ensure that our members, especially those with special needs, have access to the most up-to-date technology, clinical pathways and innovations. We will take a similar approach in Iowa, applying strategies to address the unique geographic and access challenges in the State. Examples include:

- Negotiating single case agreements with out-of-network providers for medically necessary covered services.
- Transporting members (and paying for them to stay) where care is available.
- Deploying a mobile van with select services (e.g., immunizations, other primary and specialty preventive care services) for rural access.
- Deploying a telemedicine and tele-psychiatry program.

We have successfully applied many of these strategies in other markets with similar access challenges. For example, in South Carolina, the 2012 Medicaid Health Plans Report Card rates our health plan as having the best access to care among Medicaid plans within South Carolina and in the **top quartile of the National Committee for Quality Assurance (NCQA) HEDIS 2013 National Medicaid percentile benchmarks**. Similarly, in Pennsylvania, our health plan received the top scores on access to care and member satisfaction with access.

---

*“AmeriHealth Caritas contracts with some of the largest health systems in Philadelphia, Harrisburg and Allentown, offering its members a comprehensive provider network and access to care. AmeriHealth Caritas also received the best scores overall among health plans, including top scores for access to care and for member satisfaction based on 2014 data.”*

**– Allen W. Fisher, Division Director,  
Pennsylvania Medicaid Bureau of Managed Care Operations**

---

## **Cost of care**

We recognize that a significant proportion of Iowa’s healthcare costs represent long-term care services with nearly half of Medicaid expenditures for these services. And although approximately 58 percent of the program enrollees are children, they account for only 19 percent of costs, whereas 19 percent are people with disabilities and they account for half of Medicaid expenses. Iowa Medicaid expenditures total over \$3.5 billion and the State of Iowa would like to ensure a more sustainable budget going forward:

- The goal is to achieve over \$51 million in savings within the first six months of the transition to managed Medicaid.

- More broadly, the Iowa State Health Care Innovation Plan goal is to reduce the rate of growth in healthcare costs for the State as a whole to the Consumer Price Index within three years. The goals of the ACO organization are more aggressive, which includes reducing costs by five to eight percent within three years.

As we describe below, our care management, utilization management and value-based provider partnership programs in Iowa will be tailored to meet these financial goals. We are committed to helping the State of Iowa achieve the proposed financial savings, as we have demonstrated through our achievements in other states. For example, in our Pennsylvania market, while we have approximately 50 percent of the managed Medicaid program enrollment, we manage nearly 80 percent of the highest cost cases, including members needing neonatal intensive-care unit (NICU) care and those with sickle cell disease, hemophilia and Hepatitis C. Our membership in this market has a risk-adjusted rate score that is eight percent higher than the market's average risk score, but we have managed to keep cost trends at or under three percent over the past seven years through strong relationships and innovative value-based arrangements with our provider partners.

## **Our Strategy and Approach Makes Us the Right Partner**

AmeriHealth Caritas Iowa is the right partner for the Iowa Medicaid program. As demonstrated throughout our proposal, AmeriHealth Caritas has the experience, knowledge and skills to partner with DHS to exceed the expectations of Medicaid members in Iowa. Our innovative solutions have proven successful across other states with a similar Medicaid population size and demographics and facing many of the same types of challenges as in Iowa.

Our fully integrated model across physical, behavioral and long-term services and supports aligns closely with the State of Iowa's mission, vision, goals and values, and is based on the following core tenets for the delivery of high-quality accessible healthcare and improving health outcomes for Iowa's Medicaid population:

- Person-centered approach.
- Collaborative partnerships with the State, providers and community organizations.
- Access to care when and where it is needed.
- Data-driven program design and evidence-based outcomes.

Highlights of AmeriHealth Caritas' key strengths and experience, including examples of our approach and the programs we have successfully implemented in other states, are provided below. AmeriHealth Caritas Iowa will leverage and implement these programs to develop targeted solutions to meet the specific needs and improve health outcomes and overall well-being of Iowa's Medicaid members.

### **Person-centered approach**

With 30 years of experience serving Medicaid populations, AmeriHealth Caritas understands the needs of these at-risk populations. We use this knowledge to deliver holistic, person-centered care management through IHM and as embedded partners in the communities we serve. We have learned that being a trusted community partner enables us to better serve our members by connecting them to the right care at the right time.

Iowa Medicaid members face a wide range of socio-economic, educational and other issues. Our innovative approach to serving members identifies and focuses on the unique needs of each individual—

from their physical health to the broader range of behavioral, social support, long-term services and other needs that impact the member's current and future health. Using our robust data analytics, we proactively identify members whose clinical diagnoses and utilization patterns indicate a need for additional support, and then work closely with them to develop comprehensive, person-centered care plans that address their health needs, life circumstances and personal values. Our care managers use active coaching models and adapt care interventions to support healthy outcomes.

Our person-centered approach also includes:

- Engaging, educating and empowering members to actively participate in improving their health outcomes.
- Providing members with the information they need to improve and manage their health through our innovative use of Theranos technology and our next generation member portals.
- Involving members, parents or guardians, care team members, providers, behavioral care providers, social services and community group representatives in the care planning and management process.
- Utilizing community-based services to avoid or delay institutional-based care, supporting members who desire to remain in the home and community-based setting.
- Incentivizing and rewarding healthy member-specific behaviors.



**Exhibit 3: Person-Centered Approach**

---

*"I have had nearly two years of experience working with AmeriHealth District of Columbia and have found that the company has been a wonderful partner to members, the provider community and my organization. In particular, [they have] invested in the community by establishing a member wellness center, brought innovative member engagement approaches to include the use of community health workers, a phone app and using a Member Wellness Advisory Council to fully incorporate member feedback in the development of strategies. A notable accomplishment is the reduction of 30-day hospital readmissions by 14.8% in 2014 for members with asthma or other chronic health problems. Lastly, they effectively partner with community-based organizations to focus on upstream interventions and prevention."*

**– Jacqueline C. Bowens, CEO,  
District of Columbia Primary Care Association**

---



Member willingness to engage in healthy behaviors, including preventive care, chronic condition monitoring and health and wellness activities, is a critical determinant in the success of any program to improve health outcomes. AmeriHealth Caritas Iowa will adapt the engagement strategies and approaches proven successful in other AmeriHealth Caritas markets to the Iowa market in order to reduce ER utilization, reduce care gaps and help members get the care they need. This includes:

- **Identifying members who need hands-on care management support.** We use a variety of techniques, including a risk-adjustment tool, clinically based classification system and a health risk assessment, to measure a population's burden of illness and assign each member to a single, mutually exclusive risk group. Our risk group model enables us to focus the appropriate programs and services based on risk categories and then further refine the plan to address individual needs. We pay special attention to members who fit the classification of "super-utilizer" based on a history of, or a risk for, disproportionate utilization of services and cost.
- **Team-based community care management.** To assist members with unmet chronic disease management needs and a history of frequent preventable inpatient admissions and ER visits, AmeriHealth Caritas Iowa will deploy community-facing teams to help those members navigate the healthcare system and access needed medical, behavioral health and social services. This program has proven especially effective at reducing inpatient admissions and ER visits for the super-utilizer population in other AmeriHealth Caritas markets.
- **Becoming part of the community and investing in the neighborhoods where our members live** to support our philosophy that "we are where our members are." Our staff is hired from the communities they serve, in the neighborhoods in which our members live. In addition to coordinating health events, our community staff work with individual members to engage them in their healthcare, connect them to available community services and assist them with navigating the often-complex healthcare delivery system. AmeriHealth Caritas uses proven, data-driven techniques to guide community-based activities and engage members where they live, work and go to school.

AmeriHealth Caritas also seeks to proactively engage members with long-term physical and behavioral health needs through targeted care management programs. Our LTSS program for Iowa is based on extensive experience with dual eligibles in our Medicaid programs across multiple states, including our D-SNP in Pennsylvania and our dual eligible demonstrations (MMPs) in South Carolina and Michigan. Our program is led by staff with decades of leadership experience from federal (CMS), state (Department on Aging), community and managed care settings (local Area Agencies on Aging).

We take a whole-person approach to address the unique needs and issues of the LTSS population. To do this, our dedicated care managers serve as a single point-of-contact and integrate physical, behavioral, social, medical, home-based and community-based resources. We work with members and caregivers to address barriers that impact the ability to self-manage care, coordinate complex care needs, assist with transitions of care and explain and manage long-term services and supports for the member. Our person-centered care management programs will improve health outcomes, increase access to essential services, coordinate transitions of care, ensure appropriate utilization of services and increase member satisfaction.



---

*“Mark” is 20 years old, having been diagnosed with Spinal Muscular Atrophy at 6 months of age. His parents were told that he would not live past the age of two. He became a member of AmeriHealth Caritas’ Pennsylvania health plan, Keystone First, at age 3 and has received in-home skilled nursing and support services for over 17 years. Mark is not able to walk. He is fed through a gastrostomy tube, incontinent of bowel and bladder, and only able to move his head slightly from side to side and the tips of his fingers. He can see, hear and speak. He relies on others for all of his care. Mark requires Bi-Pap assistance for breathing at night and frequent oral suctioning. His respiratory status has declined over the years. Mark attends school accompanied by a nurse.*

*Keystone First coordinates services for significantly more of these members than any of our competitors in Pennsylvania, because of our extensive, inclusive relationships with specialty care providers, including Children’s Hospital of Philadelphia. AmeriHealth Caritas has over 1,500 pediatric members for whom we have successfully coordinated in-home support services. Our 30 years of experience providing this level of in-home care allows these high-complexity members to remain at home with their families. Through the comprehensive in-home service plan coordinated by the Keystone First care manager, Mark’s parents are able to work, get adequate sleep, care for Mark’s younger sister and keep their son at home with his family.*

---

We will work with DHS to apply existing programs to the Iowa market as well as collaborate with DHS on adapting programs or developing new, innovative solutions to address Iowa-specific challenges. The following are examples of select programs and initiatives that support our holistic, person-centered approach and that we will tailor and implement in Iowa:

Program	Description	Iowa Need Addressed	Experience from Other States
<b>Member Incentive CARE Card</b>	Wellness incentive program designed to encourage members to pursue preventive health services and maintain an ongoing relationship with their PCP, OB-GYN and primary care dentist with the intent to reduce reliance on the ER for primary care services. Members earn monetary incentives on a debit card upon completion of targeted services and receipt of a valid claim for these services. Rewards are redeemable at specific “merchant classes” such as grocery stores and pharmacies.	Under-utilization of preventive and primary care.	AmeriHealth Caritas has used member incentive programs in all of our markets to engage members in healthy behaviors and preventive care. We have seen increased engagement as demonstrated in improved HEDIS scores across our health plans.

Program	Description	Iowa Need Addressed	Experience from Other States
<b>Prenatal Incentives</b>	Prenatal incentives program providing financial and support incentives that encourage pregnant members to start their prenatal care in the first trimester and to keep all of their scheduled prenatal appointments. Additional incentives are provided for pregnancies that meet particular delivery and post-partum requirements.	High incidence of low birth weight infants.	From 2012 to 2013, our South Carolina Select health plan's rate for low birth weight infants was over 4% lower than the March of Dimes rate for the State of South Carolina.
<b>Community Care Management Team (CCMT)</b>	<p>The CCMT provides high-touch, face-to-face engagement through a community-based team of nurses and social and community health worker to help members navigate and increase access to medical, behavioral health and social services.</p> <p>The program supports the development of member self-management skills through encouragement and coaching for chronic disease management.</p> <p>AmeriHealth Caritas currently has CCMTs in Philadelphia, PA; Chester, PA; Charleston, SC; and Baton Rouge, LA.</p>	<p>Under-utilization of primary and preventive care.</p> <p>High ER usage.</p> <p>High mortality rates from HIV, heart disease, diabetes, etc.</p>	Program-wide, early results from year one of the program demonstrated a more than 10% decrease in claims costs and a 25% decrease in inpatient admissions from the targeted membership population.
<b>Public Housing Assistance (PHA) and Shelter System Collaboration</b>	<p>The PHA and Shelter System collaboration provides health screenings and health information to members who reside in PHA sites and shelters through on-site events and activities. This includes educating members on how to use the health plan and reduce gaps in care.</p> <p>Members are screened for total cholesterol, HDL, LDL, triglycerides, glucose, HbA1c, blood pressure, height/weight, dental and BMI</p>	High poverty rates driving care gaps.	In 2014, our Keystone First health plan in Pennsylvania enabled screenings for members who resided in PHA sites and homeless shelters.

Program	Description	Iowa Need Addressed	Experience from Other States
<b>Welcome Home Transition Program</b>	Nurse practitioner-based program providing in-home visits and follow-up contacts for 30-60 day period to ensure smooth transition of dual eligible members from an acute care setting to home with the goal of preventing hospital readmissions or institutionalization.	Improved care transitions and coordination for complex populations.	Underway in Philadelphia with early experience showing high customer satisfaction; improved communication across providers and care teams; lower readmissions; and early identification of members at risk of institutionalization for further intervention by the care team.
<b>Jump Start Back to School</b>	Our Select Health of South Carolina health plan, along with partnering agencies, holds Jump Start Back to School events featuring free back-to-school information, health screenings, children's activities and backpacks with school supplies. The goal is to help members and families prepare for a safe, healthy and successful school year. Bilingual staff and interpretation services are available for attendees with limited English proficiency.	Under-utilization of primary and preventive care.  Unmet needs for primary care, mental health services and dental care.	Select Health has partnered with more than 45 community organizations to conduct Jump Start Back to School events. 3,732 in attendance with 60% being current members. 1,304 attendees were preregistered members with care gaps. 1,003 children were set up with follow-up visits for well-child, dental and vision.
<b>Cavity Free Kids</b>	The Cavity-Free Kids program provides oral health education and training programs for providers, preschoolers and their families. Through early childhood education programs, Cavity-Free Kids works to incorporate information and understanding about the importance of dental care into children's daily lives and as a consequence, change behaviors and attitudes.	Under-utilization of primary and preventive care.	In Pennsylvania, 28 Cavity Free Kids presentations were conducted across 35 counties with over 1,000 participants in attendance.

Program	Description	Iowa Need Addressed	Experience from Other States
<b>Mental Health First Aid</b>	A public education program that introduces participants to risk factors and warning signs of mental illness, builds understanding of their impact and provides an overview of common supports. This 8-hour course uses role-playing and simulations to demonstrate how to offer initial help in a mental health crisis and connect persons to the appropriate professional, peer, social and self-help care.	Lack of timely recognition of those in a mental health crisis.	Initial rollout and outcomes data collection underway.

#### Exhibit 4: Examples of AmeriHealth Caritas' Person-Centered Approach

*"I love this [Community Care Management] program. The collaboration between Keystone First and St. Christopher's Center for the Urban Child represents everything that health care COULD and SHOULD be. Through sharing data, resources and best practices, we are hoping to close the care gaps for our most vulnerable children with asthma. The energy and willingness to innovate on the payer side has reinvigorated my faith in the US healthcare delivery system. We are hoping to standardize, publish and replicate this model for others to learn from us."*

**– Katie McPeak, M.D., Medical Director, Center for Child and Adolescent Health,  
St. Christopher's Hospital for Children, Philadelphia, PA**

### Collaborative partnerships with the State, providers and community organizations

AmeriHealth Caritas is a mission-focused organization, driven by creating stakeholder value. Part of our strategy includes becoming an integral part of the fabric of the communities we serve. We are committed to building the health and trust of our communities and working collaboratively with state and community partners to address the truly complex challenges of the rising costs of care, increasing issues with access to care and escalating administrative complexities. We take pride in our national presence and are able to leverage key lessons and efficiencies from serving multiple Medicaid markets. To make a difference in the communities we serve, we approach each market locally and each member individually.

AmeriHealth Caritas is committed to attracting and keeping a talented workforce that reflects the diversity of the communities where we live and work. We recruit locally for key positions so that our health plan associates can relate to members with an instinctive understanding of the circumstances and conditions unique to the area. In 2013, AmeriHealth Caritas was presented a **HIRE Award** from Innovate+Educate for using creative methods to discover talent, promote diversity, develop a work-ready talent pipeline and bridge the opportunity divide. AmeriHealth Caritas Iowa will continue this philosophy and approach when hiring and staffing for AmeriHealth Caritas Iowa.

**Our ability to sustain long-term programs stems from our willingness to do the right thing for our members and State partners**, even if there may be a negative financial impact for us. For example, in a specific Pennsylvania market that covers close to 600,000 Medicaid participants, the Pennsylvania

Department of Human Services (DHS) experienced access-to-care issues with certain managed care organizations (MCOs) in the market. Over the past seven years, certain MCOs terminated multiple hospital and health system contracts as well as FQHC relationships in order to sculpt their network, ostensibly to manage costs. As a result of one health system termination, AmeriHealth Caritas gained 15,000 members over a two-month period, many of whom with high risk scores. To maintain access to care with their long-standing physicians, AmeriHealth Caritas, in partnership with the Pennsylvania DHS and the impacted providers, accepted all of these members via an expedited transfer and became engaged in managing their care.

**Developing a robust and inclusive provider network** – AmeriHealth Caritas is recognized as a leader in ensuring quality through broad open networks that offer wide access to healthcare services. For example:

- In Pennsylvania, Keystone First health plan, located in southeastern Pennsylvania, has contracts with 49 of the available 52 hospitals (11 more than the next closest health plan) including leading academic and children's hospitals such as the Children's Hospital of Philadelphia (CHOP), St. Christopher's Hospital for Children, Hospital of the University of Pennsylvania (HUP), Geisinger Health System and Temple University Hospital.
- In Nebraska, Arbor health plan has contracts with Creighton University Medical Center and the University of Nebraska Medical Center, both located in Omaha.
- In South Carolina, First Choice health plan by Select Health has contracts with Medical University of South Carolina (MUSC) in Charleston and Palmetto Health in Columbia.
- In Louisiana, AmeriHealth Caritas Louisiana has contracts with Our Lady of the Lake Health System, Ochsner Medical Center, Tulane University, CHRISTUS Health System and Louisiana State University (LSU).
- In Washington, D.C., AmeriHealth Caritas District of Columbia, has contracts with Children's National Health System, the teaching hospital for the George Washington University School of Medicine.

In Iowa we are working to ensure a robust network offering quality and unparalleled access including active contract discussions with leading provider entities, including:

- UnityPoint Health.
- Mercy Health Network.
- Broadlawns Medical Center.
- University of Iowa Health Alliance.

**Providing quality health care** — We build strong relationships with providers to deliver accessible, high-quality care. We understand the importance of giving our providers the necessary tools, incentives and access to programs to participate in our network and promote engagement, improve health outcomes and increase transparency and ease of administration. AmeriHealth Caritas builds strong and dependable provider partnerships and commits to them through value-based incentive programs, timely and accurate payment of claims and realistic provider reimbursement rates. Over 1,200 AmeriHealth Caritas providers in Pennsylvania, Louisiana, South Carolina and the District of Columbia currently participate in our incentive programs. We are discussing an array of potential programs with Iowa providers, including ACOs, shared savings and value-based payment models, in line with Iowa's SIM objectives.

---

*“AmeriHealth Caritas understands that a successful managed care program depends on a true collaboration with all providers of care. Providers can count on AmeriHealth Caritas to: ensure access for members through robust provider networks and telemedicine strategies for rural populations; collaborate closely with hospitals, primary care physicians, specialists and other providers; deliver value by conveying the information needed to improve patient care; and offer shared-savings incentives that promote better outcomes and accountable care.”*

**– David Friel, Vice President, Geisinger Health System**

---

**Establishing community partnerships** — AmeriHealth Caritas Iowa is deeply committed to partnering with the State, providers and community resources to provide access to needed healthcare services. Integrating into the communities we serve is a key success factor in developing a relationship and establishing trust. To achieve this in Iowa, we are building community partnerships throughout the State with organizations like the Iowa Association of Community Providers, Iowa Association of Area Agencies on Aging (i4a) and the Iowa Community Action Association.

Our collaborative community partnership approach also includes:

- Participation in and promotion of community events to conduct health screenings for our members.
- Collaboration with local businesses, e.g., grocery stores such as HyVee, to provide members with convenient access to key health screenings and incent healthy behaviors.
- Partnerships with schools having concentrations of low-income students to provide school supplies.
- Donations of time from our associates who volunteer to support school and other events in their local communities.

We also have extensive experience delivering creative solutions, such as our work with FQHCs to provide “one stop shopping” for medical and dental care or our Community Wellness Centers in South Carolina and the District of Columbia, to meet the needs of our members and the surrounding communities.

---

*“Select Health is passionate about serving the community, making life better for children and helping nonprofit organizations with missions that align with that passion. This company stands out as one whose culture is caring and making a difference.”*

**– Barbara A. Bond, Executive Director and CEO,  
Ronald McDonald House Charities of Charleston**

---

Examples of our programs and initiatives that are targeted to leverage and enhance collaborative partnerships are provided below. We will tailor and implement these programs in Iowa:

Program	Description	Iowa Need Addressed	Experience from Other States
<b>Community Wellness Center</b>	<p>Our Select Health South Carolina health plan established our FirstChoice Community Center to connect members to community resources and plan benefits, providing a broad range of services on site including:</p> <ul style="list-style-type: none"> <li>• Benefit Bank.</li> <li>• FirstChoice Community Educators.</li> <li>• HEDIS screenings.</li> <li>• Free notary services.</li> <li>• Free health and community events.</li> <li>• Education programs.</li> </ul> <p>In November 2014, our District of Columbia health plan opened its first Community Wellness Center as an extension of its outreach, care management and wellness strategies.</p>	<p>Under-utilization of primary and preventive care.</p> <p>Disparities in health and healthcare access based on race and ethnicity.</p>	<p>The FirstChoice Community Center has served over 14,000 people since 2010. The majority of these (60%) are Select Health members. Over 40 partnering agencies utilize the center.</p> <p>Over 1,000 children received health screenings and follow-up appointments.</p> <p>Over 5,900 children got a better start for the school year through education programs.</p> <p>Over 2,000 families received assistance with applications for other social services.</p>
<b>Healthy Hoops®</b>	<p>Healthy Hoops is a trademarked innovative childhood asthma and obesity management program. Approved by the National Committee for Quality Assurance (NCQA), Healthy Hoops uses basketball as a platform to teach children with asthma and their families, how to manage their condition through proper nutrition, exercise and the appropriate medication use.</p>	<p>Prevalence of childhood asthma and childhood obesity.</p>	<p>Over the past 13 years, Healthy Hoops has served over 10,000 families in Pennsylvania, South Carolina, Indiana, District of Columbia and Kentucky markets. The program has demonstrated decreases in inpatient and ER utilization, an increase in the use of prevention inhalers and a decrease in the use of rescue medications.</p>



Program	Description	Iowa Need Addressed	Experience from Other States
<b>Health Empowerment Tour</b>	The Health Empowerment Tour is designed to engage and educate participating members and the wider community on health and wellness in a faith-based setting. The goal of the program is to promote health education, health literacy and preventive healthcare. Consisting of six weeks of intensive workshops, the program encourages members to prevent, control and reverse chronic conditions by focusing on nutrition, physical activity, water intake and medication compliance.	Disparities in health and healthcare access.	In a recent roll-out through our Keystone First health plan, there was a 13% drop in total cholesterol and a 10% drop in overall blood pressure among participants and an average weight loss of four pounds. In addition, participants increased their awareness of nutrition content in foods and willingness to try healthier foods. Over 24% of participants lost weight.
<b>Community Baby Showers</b>	An engaging and fun way to introduce pregnant moms to the Bright Start® program. Provide risk assessments to determine individual care needs, conduct dental screenings for pregnant moms and deliver parenting preparation courses.	High incidence of low birth weight infants.	In 2014, more than 120 pregnant women attended Community Baby Showers hosted by one of our Pennsylvania health plans; 38% of these members also received dental screenings.
<b>"Try the Y" Program</b>	Collaboration between AmeriHealth Caritas' Nebraska affiliate and community YMCAs to offer a 90-day trial period at no cost to members to expose members to healthier lifestyles and provide them with access to health and wellness facilities they otherwise might not be able to afford.	Disparities in health and healthcare access. High death rates from diabetes and heart disease. High percentage of Iowa residents who are overweight or obese.	In 2014, our Nebraska health plan's program engaged 182 total households, 646 total individuals, and generated 2,179 total YMCA visits.

Program	Description	Iowa Need Addressed	Experience from Other States
<b>FQHC “Community Partners Program”</b>	Aligns incentives and engages physicians in shared goal of positive patient outcomes and economic stewardship; Web-based provider dashboard promotes transparency, collaboration and self-service reporting.  Members to receive “one stop shop” for medical and dental care in a single visit through FQHC partnerships as many Iowa Medicaid members receive medical services at FQHCs.	Increase dental preventive care services.	In 2014, Keystone First’s program included 27 FQHC screening events, resulting in 219 dental screens and 95 adolescent wellness screenings.
<b>Centering Partnerships</b>	Program is to help pregnant women develop a support group with other women of similar gestational age.	High incidence of low birth weight infants.	At our Select Health plan in South Carolina, a key provider partner study by Dr. Amy Picklesimer, Greenville Health System OB-GYN Center, determined the rate of preterm delivery at 37 weeks gestational age for women in Centering group care was 7.9% compared to 12.7% for women in traditional care and the rate of preterm delivery at 32 weeks gestational age was 1.3% for women in group care compared to 3.1% for women in traditional care.

#### **Exhibit 5: Examples of AmeriHealth Caritas’ Collaborative Partnerships**

### **Access to care**

Access to care is fundamental to improving health outcomes. It is also one of the biggest challenges that the Medicaid population faces in receiving timely and quality healthcare. By putting people at the center of healthcare, understanding their needs and meeting them wherever they are, AmeriHealth Caritas enables access to care when and where it is needed. Our multi-pronged approach to providing and expanding access to care in Iowa will include the following:

- **Transportation** — Providing transportation services for members to access healthcare at provider facilities, including member transportation support and coordination.

- **Mobile health vans** — Bringing healthcare to members through the use of mobile healthcare service vans; we will offer maternity and dental care to members through mobile units in targeted areas with access issues. These mobile service units will function as primary care locations offering primary care and dental follow-up. We will develop additional programs and expand geographical reach, as we determine the specific areas of need in the specialist provider community.
- **Data analytics** — Using advanced data analytics and geo-access tools to establish and maintain a strong provider network with the right number and types of providers located where they are needed.
- **Language** — Assessing member demographics such as language needs and including providers with the required language skills in our network, as well as providing translation services for more unique language needs.
- **Contact Center of Excellence (CCOE)** — Utilizing our CCOE staff to coordinate member transportation needs and facilitate the scheduling of member appointments with providers and connect members to social support resources; these teams provide 24-hour access.
- **Telehealth** — Providing remote access via telehealth options for members who cannot access on-site care. AmeriHealth Caritas Iowa will partner with leading provider organizations on their established telehealth programs to provide greater access services to Iowa Medicaid members. We will also partner with an industry-leading telemedicine company to provide member access to primary care and specialty providers, including behavioral health, via video and phone.
- **Telemonitoring** — Providing telemonitoring services including home biometric monitoring. This will be used as part of managing a member's care plan to incorporate real-time data. We will implement a congestive heart failure telemonitoring program in Iowa in the first year of operation.
- **Mobile technology** — Employing mobile technology to provide real-time on-demand member access to benefits information, medication history, ID cards, provider directory with geo-location tools, PCP information as well as sending reminders to address potential gaps in care.
- **Community Care Management** — Teams that extend care management into the community. Teams are deployed to communities that have a concentrated number of high-risk members, including those who have complex care needs. These members are often times difficult to engage through telephonic care management, access care primarily through emergency services, or are frequently admitted to inpatient settings.
- **Integration of access to physical and behavioral health services** — As we have done in other states, we will work with providers to support real or virtual integration of care. For example, in another market, we supported PCPs in identifying unmet behavioral health needs, developing a business plan and hiring a Licensed Clinical Social Worker to provide psychiatric services in that location.
- **Community Wellness Centers** — Establishing three state-of-the-art Community Wellness Centers in Iowa, potentially in Des Moines, Cedar Rapids and Sioux City, where many members reside. The Community Wellness Centers will be used to promote our mission to help members get care, stay well and build healthy communities. The centers will be a resource hub in the community and provide space for new member orientations, community meetings, wellness screenings, care management, doctor appointment scheduling, health education and coordinated social services.

AmeriHealth Caritas has been highly effective in reducing or overcoming these barriers to accessing care in the other Medicaid markets we serve. AmeriHealth Caritas Iowa will employ all of these strategies in Iowa to improve access to care for Iowa Medicaid members.

---

*“The [AmeriHealth Caritas] team is dedicated to improving the health status of the members we serve together. In particular, AmeriHealth Caritas has partnered with our organization on many initiatives including reducing preventable admissions and unnecessary Emergency Room utilization, family planning services and coordinating care for our asthmatic and high risk pediatric membership.”*

**– Thomas J. Todorow, Executive Vice President and Chief Financial Officer,  
The Children’s Hospital of Philadelphia**

---

Examples of programs and initiatives implemented in other states that provide and enhance access to care are provided below. We will tailor and implement these programs in Iowa:

Program	Description	Iowa Need Addressed	Experience from Other States
<b>Community Outreach Solutions (COS) Program</b>	Our COS teams identify, locate and visit hard-to-reach, high-risk members, developing a critical link between the medical delivery system and individuals where they live. COS associates live and work in targeted geographic areas where there are a high number of chronically ill members who are not well connected to the care system. These teams know the local ecosystem for social services and help members sort through complex and competing needs.	Under-utilization of primary and preventive care. Unmet needs for primary care, mental health services and dental care.	In AmeriHealth Caritas' Pennsylvania, Nebraska and District of Columbia Health Plans, we have increased member engagement and access to care. In 2014, we went to our hardest to reach members in Pennsylvania and reached the following membership: <ul style="list-style-type: none"><li>• 15,383 total home visits attempted with 30% contacted.</li><li>• 1,929 appointments made, with 50% PCP appointments confirmed.</li></ul>

Program	Description	Iowa Need Addressed	Experience from Other States
<b>Transition Home Visit Program</b>	Home visit by a licensed therapist after a behavioral health hospitalization. Disease education, validation of contact information, needs assessment, and establishment of regular outpatient follow up care are the primary areas of focus.	Access to and follow up with outpatient behavioral health services.	Seven-day follow up after hospitalization rates increased from 22% to over 50% within the first year of implementation and results have been sustained.
<b>Non-Emergency Transportation (NEMT) Services</b>	Our comprehensive non-emergency transportation program focuses on helping members get safely to and from appointments, especially when a lack of transportation resources presents a barrier to care. This includes the coordination of non-emergency transportation services as well as free transportation to doctor's visits.	Under-utilization of primary and preventive care. Limited access to care.	In other state Medicaid programs for which NEMT is a covered service, AmeriHealth Caritas has delivered efficient transportation to members through an established process that includes determining the best transportation method, monitoring standards and measuring quality.
<b>Free Cell Phone Program</b>	Our Voxiva/Tracfone initiative dispenses free mobile phones to our members. With text reminders, through Text4Babies, Text4Kids and Text4Health (adult health program), our members can opt into these programs for free.	Under-utilization of primary and preventive care. Unmet needs for primary care, mental health services and dental care. Limited access to dental care.	Deployed in our AmeriHealth Caritas District of Columbia, Louisiana and Pennsylvania health plans, we have dispensed 30,000 free phones to our members and are receiving text messages through our texting programs.

**Exhibit 6: Examples of AmeriHealth Caritas Programs that Increase Access to Care**

*"In the areas of access, cost and quality, AmeriHealth Caritas Louisiana's performance has been key in helping our Bayou Health program demonstrate early success. They have developed or tailored their programs to our members' needs, which vary significantly by geographic region with the state."*

**– Ruth Kennedy, Medicaid Director,  
State of Louisiana, Department of Health and Hospitals**

## Data-driven results and evidence-based outcomes

For over 30 years, AmeriHealth Caritas has consistently improved clinical outcomes and the quality of care for the Medicaid population across the numerous states we serve. We understand the importance of identifying and supporting a robust set of programs to achieve better outcomes driven by program goals and initiatives.

Our Quality Assessment Performance Improvement (QAPI) infrastructure, coupled with our **PerformPlus** value-based contracting portfolio, is used to identify and implement interventions to achieve targets set for identified performance measures. We build a high-value strategy that improves access through engagement of members and communities; outcomes by reducing healthcare disparities; quality of care through meaningful partnerships and networks; and savings through implementing best practices. We accomplish this through:

- **Utilizing data to evaluate and improve care management and care coordination** — Our data analytics capabilities have enabled us to identify and enrich how we interact with providers and support our members in the management and coordination of their care. We use data to identify and evaluate a variety of programs including incentive, value-based performance models. **PerformPlus** is AmeriHealth Caritas's portfolio of value-based incentive programs designed to encourage the right care at the right place. Provider groups, hospitals and integrated delivery systems are rewarded for achieving key performance indicators built around adherence to evidence-based clinical practices, achieving targeted quality outcome measures and providing cost-effective, appropriate care. We continually refine our programs and approach with revised targeted measures to align with the goals of our Medicaid Agency stakeholders and anticipate successfully employing these programs in Iowa.
- **Sharing data through platforms and technology for providers, members, families, contact centers and care managers** — Our extensive data collection and analytic capabilities, coupled with our proven methods of information delivery, allow providers and members to access the information they need when they need it. Providers have access to extensive dashboards through our **Quality Enhancement Program (QEP)** and **PerformPlus** dashboards. Our systems also provide alerts on evidence-based care recommendations when a member's record is accessed in our secure **Provider Portal**, allowing the provider to address gaps in care together with the member. For members, our secure **Member Portal** and our custom mobile application provide ongoing health and wellness reminders, as well as prompts for important activities such as HgbA1c monitoring for diabetes and refill reminders for medications. Our contact centers, including Member Services and Care Management, have access to the same alerts and data, allowing for collaboration of care and closure of care gaps. These tools enable members to take control of their health, providing support and coaching to facilitate desired actions.
- **Sophisticated information exchange and analytics driving member and provider engagement** — AmeriHealth Caritas has invested in critical areas related to Health Insurance Exchanges (HIEs) to capture and utilize member information, enhancing our ability to integrate key information with our care management applications and providing access to more and better data for decision-making and member support.

Examples of how AmeriHealth Caritas shares data to drive improved outcomes are reflected in some of our programs described below, all of which will be tailored and implemented in Iowa:

Program	Description	Iowa Need Addressed	Experience from Other States
<b>PerformPlus Value-based Programs</b>	<p>Reward program for physicians for timely, appropriate ambulatory care and positive patient outcomes; utilizing peer and trend based measurements, including HEDIS measures, to determine outcomes and link to rewards. Reimbursement incentives based on performance for closing gaps in care for agreed-upon HEDIS and other quality metrics, including:</p> <ul style="list-style-type: none"> <li>• High-quality and cost-effective care.</li> <li>• Member service and convenience.</li> <li>• Accurate and complete health data.</li> </ul> <p>Program feature is an industry-leading, web-based PerformPlus dashboard Portal with monthly performance reporting and drill-down capability that engages providers and provides full transparency.</p>	<p>Quality of care.</p> <p>Under-utilization of primary and preventive care.</p>	<p>More than 40% of our managed care membership across all markets receives care from a provider that participates in one or more of the PerformPlus value-based programs.</p> <p>Early results of our Shared Savings partnerships resulted in the following improvements:</p> <ul style="list-style-type: none"> <li>• 8.6% decrease in Potentially Preventable Admissions.</li> <li>• 2.3% decrease in Potentially Preventable Readmissions.</li> <li>• 50% key quality indicators have improved by an average of 7%.</li> </ul>

#### **Exhibit 7: AmeriHealth Caritas' Data-Driven Programs**

*"IowaHealth+ greatly appreciates AmeriHealth's vision for working in partnership with Iowa's providers to improve the quality of care delivered to the Medicaid populations and values the support of the patient-centered health home model and need to invest in the primary care delivery system. We also want to recognize AmeriHealth's understanding and willingness to work to streamline processes and protocols in order to assist providers in Iowa in efficiently and effectively delivering care to patients (i.e. prior authorization processes, data, reporting and analytic platforms, etc.).*

**– Theodore J. Boesen Jr., CEO,  
IowaHealth+, an FQHC owned Accountable Care Organization**



## Our Proposed Organization

AmeriHealth Caritas Iowa will partner with DHS early on and make it a priority to help DHS solve the challenge of affordably connecting vulnerable populations with high-quality healthcare. To maximize access to care and services, **AmeriHealth Caritas Iowa will establish a main office in Des Moines and three state-of-the-art Community Wellness Centers throughout the State of Iowa**, potentially in Des Moines, Cedar Rapids and Sioux City. These locations were identified based on population density, percentage of population in poverty, population receiving Medicaid and percentage of adults aged 18 and older who self-report that they receive insufficient social and emotional support all or most of the time. Our local offices and state-of-the-art Community Wellness Centers will be strategically located near ERs and other community services so that we can better serve our members, following our approach of “we are where the members are.”

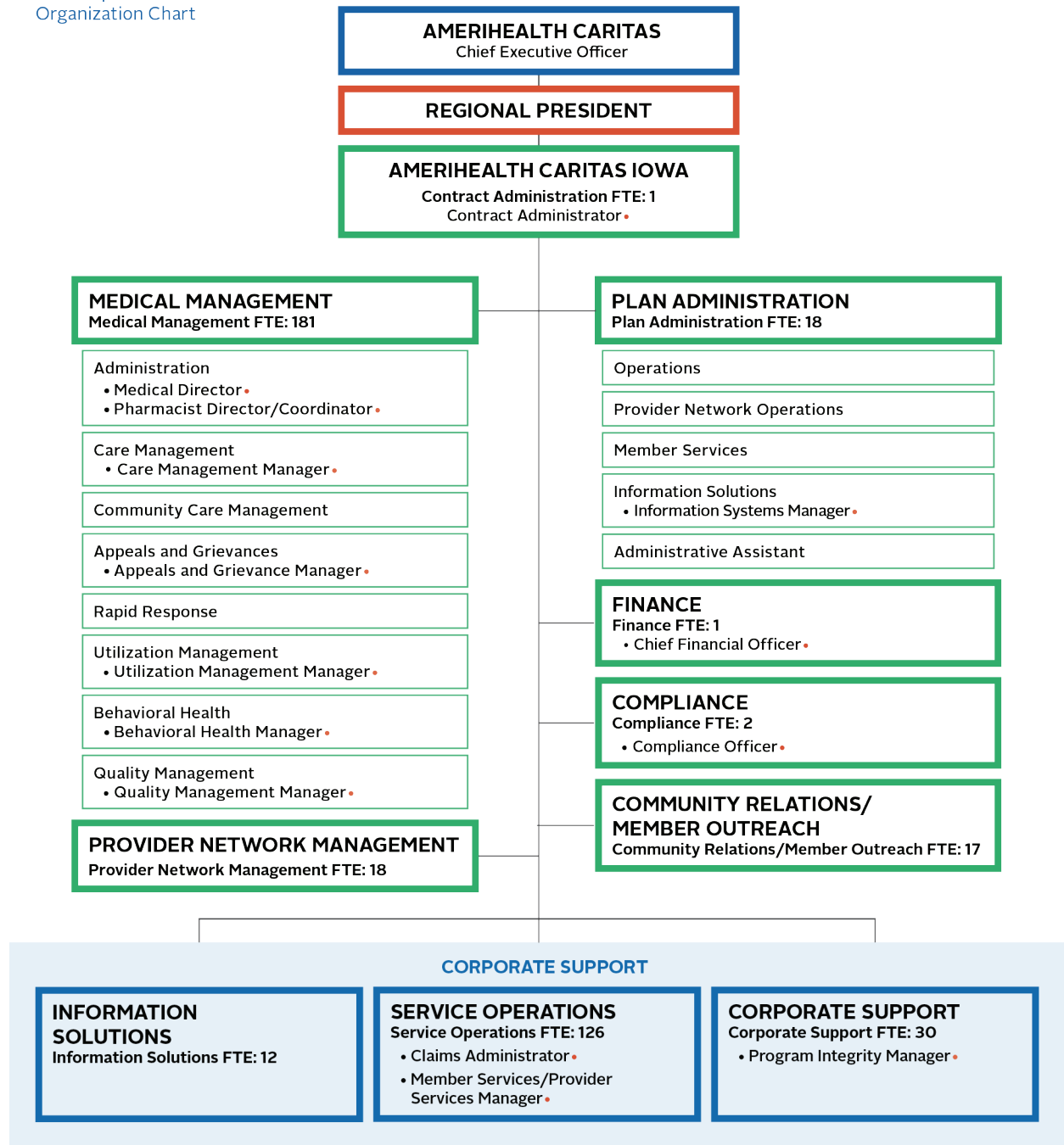
To support the intensive management needs of a brand new managed Medicaid program, AmeriHealth Caritas Iowa expects to commit significant resources to support this contract. We plan to hire over 400 full-time associates and over half of this team will be located in an AmeriHealth Caritas Iowa office or in the field, including Provider Network staff, social services experts, community outreach personnel and community care management teams. The remaining part of this team supporting the health plan will be working in other AmeriHealth Caritas locations outside of Iowa. We will leverage our national resources and operations for functions including customer service, claims processing and pharmacy benefits management to leverage efficiencies associated with shared services due to economies of scale.

AmeriHealth Caritas is not just a name but rather we are residents of and familiar faces in the communities we serve. We will partner with local vendors and organizations to better serve the needs of Iowa Medicaid members. Our strong local presence in Iowa will provide individuals and families with better access to care, education and opportunities.

Our staffing plan addresses the initial implementation for Iowa Medicaid, as well as the ongoing execution of the plan. The pre-implementation staffing model includes those positions that will establish network adequacy, medical management, project management and human resources support to get the health plan up and running as rapidly and effectively as possible. Our post-implementation staffing model supports the long-term vision for the health plan and includes all functions necessary to ensure we provide a "high-touch" experience for the member as we help them get care and stay well. Our staffing model includes positions that truly reflect that “care is the heart of our work”.

The following exhibit provides an overview of the proposed AmeriHealth Caritas Iowa organizational structure. Key staff will be 100 percent dedicated to the Iowa implementation once the award is announced. We have positioned ourselves to hire candidates from our talent pipeline quickly as this will help to ensure a seamless transition.

Post-Implementation  
Organization Chart



• Indicates required role

**Exhibit 8: AmeriHealth Caritas Iowa Organizational Chart**

## Conclusion

AmeriHealth Caritas has a long and successful history of partnering with states to address their unique needs and challenges. We bring a mission-focused approach in our work to improve the healthcare of the communities we serve. Our innovative programs and solutions will provide the highest quality of care and significant value for Iowa Medicaid members and the State.

AmeriHealth Caritas Iowa and the Iowa DHS have a shared vision for the next generation of Iowa's Medicaid program. Everything we do and every decision we make starts with our members in mind and we are committed to giving our members the best healthcare experience possible. Through our holistic person-centered approach to healthcare and services, collaborative partnerships with DHS, providers and communities and an intense focus on increasing access to care, we will remove barriers to healthcare and services for those most in need and deliver better health outcomes.

AmeriHealth Caritas Iowa is the right choice for Iowa. We would be honored to be your partner for the Iowa Medicaid program.

## Table of Contents

<b><u>Section</u></b>	<b><u>Page Number</u></b>
<b>Tab 1, Transmittal Letter .....</b>	<b>1</b>
Executive Summary.....	3
<b>Tab 2, Table of Contents .....</b>	<b>33</b>
<b>Tab 3, Bidder's Approach to Meeting the Scope of Work.....</b>	<b>35</b>
Section 1 .....	35
Section 2 .....	51
Section 3 .....	153
Section 4 .....	265
Section 5 .....	373
Section 6 .....	377
Section 7 .....	453
Section 8 .....	457
Section 9 .....	537
Section 10 .....	633
Section 11 .....	697
Section 12 .....	753
Section 13 .....	779
Section 14 .....	907
Section 15 .....	925
<b>Tab 4, Bidder's Background .....</b>	<b>931</b>
<b>Tab 5, Attachments .....</b>	<b>967</b>
<b>Tab 6, RFP Forms, Financial Statements, Resumes, and Contract Lists .....</b>	<b>979</b>

This page intentionally left blank.